

U.S. DOT CROSSING INVENTORY FORM

DEPARTMENT OF TRANSPORTATION
FEDERAL RAILROAD ADMINISTRATION

OMB Control No. 2130-0017

Expires: 3/31/2003

A. Initiating Agency <input checked="" type="checkbox"/> Railroad <input type="checkbox"/> State	B. Crossing (max. 7) <div style="font-size: 1.5em; font-weight: bold; text-align: center;">260486V</div>	C. Reason for Update <input checked="" type="checkbox"/> Changes in Existing Data <input type="checkbox"/> New Crossing <input type="checkbox"/> Closed Crossing or Abandoned	D. Effective Date (MM/DD/YYYY) <div style="text-align: center;">03/20/2007</div>
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Part I: Location and Classification Information

1. Railroad Oper. Co. (code (max. 4 char.) or <div style="text-align: center;">EJE</div>		2. State (2 char.) <div style="text-align: center;">IL</div>		3. County (max. 20 char.) <div style="text-align: center;">LAKE</div>	
4. Railroad Division or Region (max. 14) <div style="text-align: center;">JOLIET</div>		5. Railroad Subdivision or District (max. 14) <div style="text-align: center;">WESTERN SUB</div>		6. Branch or Line Name (max. 15) <div style="text-align: center;">MAINLINE</div>	
7. RR Milepost (max. 7 char.) (nnnnn.nn) <div style="text-align: center;">0065.16</div>		8. RR I.D. No. (max. 10 char.)			
9. Nearest RR Timetable Station (max. 15) (optional) <div style="text-align: center;">RONDOUT</div>		10. Parent RR (max. 4) (if applicable)		11. Crossing Owner (RR or Company name) (if applicable) <div style="text-align: center;">EJE</div>	
12. City (max. 16 char.) (check <input type="checkbox"/> In one) <input checked="" type="checkbox"/> Near <div style="text-align: center;">LIBERTYVILLE</div>		13. Street or Road Name (max. 17 char.) <div style="text-align: center;">BRADLEY ROAD</div>		STATE SUPPLIED INFORMATION	
14. Highway Type & No. (max. 7) <div style="text-align: center;">2698</div>		15. ENS Sign Installed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		21. HSR Corridor ID (2 char.)	
16. Quiet Zone <input checked="" type="checkbox"/> No <input type="checkbox"/> Partial <input type="checkbox"/> 24 hr <input type="checkbox"/> Unknown		17. Crossing Type (choose one) <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Pedestrian		22. County Map Ref. No. (max. 10)	
18. Crossing Position <input checked="" type="checkbox"/> At Grade <input type="checkbox"/> RR Under <input type="checkbox"/> RR Over		19. Type of Passenger Service <input type="checkbox"/> AMTRAK <input type="checkbox"/> AMTRAK & Other <input type="checkbox"/> Other <input checked="" type="checkbox"/> None		23. Latitude (max. 10 char.) <div style="text-align: center;">42.2755500</div>	
20. Average Passenger Count Per Day <div style="text-align: center;">0</div>		24. Longitude (max. 11 char.) <div style="text-align: center;">-087.9052700</div>		25. Lat/Long Source <input type="checkbox"/> Actual <input checked="" type="checkbox"/> Estimated	
26. Is There an Adjacent Crossing With a Separate Number? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Provide _____ (7 characters)					

27. PRIVATE CROSSING INFORMATION

27.A. Category (check one) <input type="checkbox"/> Farm <input type="checkbox"/> Residential <input type="checkbox"/> Recreational <input type="checkbox"/> Commercial		27.B. Public <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		27.C. Signs/Signals <input type="checkbox"/> None <input type="checkbox"/> Signs Specify (max. 15) _____ <input type="checkbox"/> Signals Specify (max. 15) _____	
28.A. Railroad Use (max. 20)			29.A. State Use (max. 20)		
28.B. Railroad Use (max. 20)			29.B. State Use (max. 20)		
28.C. Railroad Use (max. 20)			29.C. State Use (max. 20)		
28.D. Railroad Use (max. 20)			29.D. State Use (max. 20)		
30. Narrative (max. 100) <div style="text-align: center;">REMOTE MONITORING SYSTEM</div>					
31. Emergency Contact (Telephone No.) (847)-549-5200		32. Railroad Contact (Telephone No.) (815)-740-6742		33. State Contact (Telephone No.) (847)-705-4110	

MUST COMPLETE REMAINDER OF FORM FOR PUBLIC VEHICLE CROSSINGS AT GRADE

Part II: Railroad Information

1. Number of Daily Train Movements			
1.A. Total Trains <div style="text-align: center;">5</div>	1.B. Total Switching Trains <div style="text-align: center;">3</div>	1.C. Total Daylight Thru Trains (6 AM to 6 PM) <div style="text-align: center;">2</div>	1.D. Check if Less Than One Movement Per <input type="checkbox"/>
2. Speed of Train at Crossing 2 A. Maximum Time Table (mph) <div style="text-align: center;">45</div> 2 B. Typical Speed Range Over (mph) from <div style="text-align: center;">5</div> to <div style="text-align: center;">45</div>			
3. Type and Number of Tracks Main <div style="text-align: center;">1</div> Other <div style="text-align: center;">0</div> If Other, Specify (max. 10) _____			
4. Does Another RR Operate a Separate Track at If Yes, Specify RR (max. 16 char.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5. Does Another RR Operate Over Your Track at Crossing? If Yes, Specify RR (max. 16 char.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <div style="text-align: center;">UP</div>	

706-0014 x-12537

U.S. DOT CROSSING INVENTORY FORM

B. Crossing Number(max. 7) 260486V		PAGE 2		D. Effective Date (MM/DD/YYYY) 03/20/2007	
Part III: Traffic Control Device Information					
1. No Signs or Signals <input type="checkbox"/> Check if Correct		2. Type of Warning Device at Crossing Signs (specify number of each)			
		2.A. Crossbucks <div style="text-align: center;">2</div>	2.B. Highway Stop Signs (R1-1)	2.C. RR Advance Warning Signs (W10-1) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2.D. Hump Crossing Sign (W10-5) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown
2.E. Pavement <input type="checkbox"/> Stoplines <input type="checkbox"/> RR Xing Symbols <input checked="" type="checkbox"/> None			2.F. Other Signs: (specify MUTCD type) Number _____ Specify Type (max. 10 char.) _____ Number _____ Specify Type (max. 10 char.) _____		
3. Type of Warning Device at Crossing Train Activated Devices(specify number of each)					
3.A. Gates <div style="text-align: center;">2</div>	3.B. Four-quadrant (or full barrier) Gates <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3.C. Cantilevered (or Bridged) Flashing Over Traffic (number) _____ Not Over Traffic (number) _____		3.D. Mast Mounted Flashing Lights(number) <div style="text-align: center;">2</div>	3.E. Number of Light Pairs <div style="text-align: center;">4</div>
3.F. Other Flashing Lights: Number _____ Specify Type(max. 9) _____		3.G. Highway Traffic Signals (number) (number) _____		3.H. Wigwags (number) (number) _____	3.J. Bells (number) <div style="text-align: center;">2</div>
3.K. Other Train Activated Warning Devices: (specify) (max. 9 char.) _____					
4. Specify Special Warning Device NOT Train (max. 20 char.) _____			5. Channelization Devices With Gates <input type="checkbox"/> All Approaches <input type="checkbox"/> One Approach <input checked="" type="checkbox"/> None		
6. Train Detection <input checked="" type="checkbox"/> Constant Warning Time <input type="checkbox"/> DC/AFO <input type="checkbox"/> Motion Detectors <input type="checkbox"/> Other <input type="checkbox"/> None		7. Signalling for Train Operation: Is Track Equipped With Signals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Traffic Light Interconnection/Preemption <input type="checkbox"/> Not Interconnected <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Simultaneous Preemption <input type="checkbox"/> Advance Preemption	
9. Reserved For Future Use		10. Reserved For Future Use		11. Reserved For Future Use	
12. Reserved For Future Use					
Part IV: Physical Characteristics					
1. Type of Development <input type="checkbox"/> Open Space <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional				2. Smallest Crossing Angle <input type="checkbox"/> 0 - 29 <input type="checkbox"/> 30 - 59 <input checked="" type="checkbox"/> 60 - 90	
3. Number of Traffic Lanes Crossing Railroad <div style="text-align: center;">2</div>		4. Are Truck Pullout Lanes Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5. Is Highway Paved? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6. Crossing Surface (on main line) <input type="checkbox"/> 1. Timber <input type="checkbox"/> 2. Asphalt <input type="checkbox"/> 3. Asphalt and Flange <input type="checkbox"/> 4. Concrete <input type="checkbox"/> 5. Concrete and Rubber <input checked="" type="checkbox"/> 6. Rubber <input type="checkbox"/> 7. Metal <input type="checkbox"/> 8. Unconsolidated <input type="checkbox"/> 9. Other (Specify) _____					
7. Does Track Run Down a Street? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Nearby Intersecting Highway? <input type="checkbox"/> Less than 75 feet <input checked="" type="checkbox"/> 75 to 200 feet <input type="checkbox"/> 200 to 500 feet <input type="checkbox"/> N/A Is it Signalized? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Is Crossing Illuminated? (street lights within approx. 50 feet from nearest) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		10. Is Commercial Power Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		11. Space Reserved For	
Part V: Highway Information					
1. Highway System <input type="checkbox"/> Interstate <input checked="" type="checkbox"/> Federal Aid, Not NHS <input type="checkbox"/> Nat. Hwy System (NHS) <input type="checkbox"/> Non Federal Aid		2. Is Crossing on State Highway System? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		3. Functional Classification of Road at Crossing <div style="text-align: center;">17</div>	
4. Posted Highway <div style="text-align: center;">0</div>		5. Annual Average Daily Traffic (AADT) Year 2000 AADT 008300		6. Estimate Percent <div style="text-align: center;">00</div>	
				7. Average Number of School Over Crossing per School Day <div style="text-align: center;">0</div>	

Paperwork Reduction Act: Public reporting for this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB Control Number. The valid OMB Control Number for this collection is 2130-0017.

ELGIN, JOLIET & EASTERN RAILWAY

EJ&E

EXECUTIVE DEPARTMENT

1141 Maple Road

Joliet, Illinois 60432-1981

(815) 740-6727, FAX (815) 740-6729

K. L. Hay, Safety, Quality & Admin., Manager

March 21, 2007

RECEIVED

MAR 28 2007

Illinois Commerce Commission
RAIL SAFETY SECTION

Mr. Michael Stead
Railroad Safety Program Administrator
Illinois Commerce Commission
527 E. Capitol Ave.
Springfield, IL 62701-1827

SUBJECT: Updating U.S. DOT Crossing Inventory

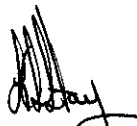
Dear Mr. Stead:

Attached is FRA F 6180.71 form showing changes in the following crossing protection:

<u>Crossing Number</u>	<u>Location</u>	<u>Street/Highway</u>
260 486V	Libertyville, IL	Bradley Road

Should you require additional information, please contact me at (815) 740-6727.

Sincerely yours,



Ken L. Hay
Safety, Quality and Administrative Manager

KLH/pn

Attachment